

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-878)						SERIAL NO. 10/069783	PILING DATE
						APPLICANT(S)	
CLAIMS							
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1		1		1		51	
2		1		1		52	
3		1		1		53	
4	2					54	
5						55	
6						56	
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44						94	
45						95	
46						96	
47						97	
48						98	
49						99	
50						100	
TOTAL IND.		1		1		TOTAL IND.	
TOTAL DEP.	5		5			TOTAL DEP.	
TOTAL CLAIMS	6		6			TOTAL CLAIMS	

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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